PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/770,697

| CLAIMS A | S FILED - PART | *** | | | | | |
|---|--------------------------------------|--------------------------------|---------------------|------------------------|--|-------------------------|--|
| TOTAL CLAIMS | (Column 1) (Co | | SMALL E | | OTHE OR SMALL | OTHER THAN SMALL ENTITY | |
| FOR | | | RATE | FEE | RATE | FEE | |
| | NUMBER FILED | NUMBER EXTRA | BASIC FEE | 355.00 | OR BASIC FE | 710.00 | |
| TOTAL CHARGEABLE CLAIMS | / / minus 20= | * | X\$ 9= | | OR X\$18= | | |
| INDEPENDENT CLAIMS | / / minus 3 = | * | X40= | | | | |
| MULTIPLE DEPENDENT CLAIM F | PRESENT | | 405 | | "` | | |
| * If the difference in column 1 is | less than zero, enter | "0" in column 2 | +135= | C | P +270= | | |
| CLAIMS AS AMENDED - PART II | | | TOTAL | | OR TOTAL | | |
| (Column 1) (Column 2) (Column 3) | | | SMALLE | NTITY O | OTHER R SMALL | | |
| REMAINING AFTER AMENDMENT | NUME PREVIO PAID F | BER PRESENT | RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE | |
| Total * / / | Minus ** | 0 = | X\$ 9= | 0 | R X\$18= | | |
| FIRST PRESENTATION OF MU | / | CLAIM | X40= | 6 | R X80= | | |
| | | | +135= | OI | R +270= | | |
| | | | TOTAL ADDIT. FEE | OI | TOTAL | | |
| (Column 1) | (Colum | n 2) (Column 3) | ADDIT. FEE | | ADDIT. FEE | | |
| CLAIMS REMAINING AFTER AMENDMENT Total * Independent * | HIGHE NUMBI PREVIOL PAID FO | ST ER PRESENT JSLY EXTRA | | ADDI- IONAL FEE | RATE | ADDI- TIONAL | |
| Total * | Minus ** | 1 2 | X\$ 9= | | VC10 | FEE | |
| Independent * | Minus *** | = | | OF | | | |
| FIRST PRESENTATION OF MU | LTIPLE DEPENDENT C | CLAIM | X40= | OF | X80= | | |
| | | | +135= | OR | +270= | | |
| | | | TOTAL ADDIT. FEE | OR | TOTAL ADDIT. FEE | | |
| (Column 1) | (Column | | | | , | | |
| REMAINING AFTER AMENDMENT | NUMBE PREVIOU PAID FO | R PRESENT SLY EXTRA | RATE TI | DDI- ONAL FEE | RATE | ADDI- TIONAL FEE | |
| Total * | Minus ** | = | X\$ 9= | | X\$18= | | |
| Independent + | Minus *** | = | X40= | OR | | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | 7,40= | OR OR | X80= | | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | OR | +270= | | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE OR ADDIT. FEE The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | |
| The Highest Number Previously Paid F | or" (Total or Independent) | is the highest number for | ound in the approp | riate box in co | lumn 1. | | |